

REMARKS

In view of the above amendments and the following remarks, reconsideration of the objections and rejections set forth in the Office Action of February 3, 2009 is respectfully requested.

In order to make necessary editorial corrections, the entire specification and abstract have been reviewed and revised. As the revisions are quite extensive, the amendments to the specification and abstract have been incorporated into the attached substitute specification and abstract. For the Examiner's benefit, a marked-up copy of the specification indicating the changes made thereto is also enclosed. No new matter has been added by the revisions. Entry of the substitute specification is thus respectfully requested.

The Examiner objected to claim 11 due to an informality. However, dependent claim 11 has now been amended so as to correct the obvious editorial error identified by the Examiner. Consequently, it is submitted that the Examiner's objection to claim 11 has been overcome.

The Examiner rejected original claims 1-6 as being anticipated by the Imbert reference (USP 6,027,482); and the rejected claims 7-19 as being unpatentable over the Imbert reference. However, original claims 1-5 have been cancelled. In addition, most of the remaining claims, including all of the independent claims, have now been amended, and new dependent claims 20 and 21 have been added. As a result, it is respectfully submitted that the amended and new claims are clearly patentable over the prior art of record.

In the following discussion, reference will be made to certain portions of the present application. However, reference to any particular portions of the specification or drawings is provided only for illustrative purposes, and is not intended to otherwise limit the scope of the claims to any particular embodiments.

Independent claim 6

Amended independent claim 6 is directed to a medical syringe that comprises a syringe unit including a syringe body and a lure to be inserted into a connection target, and a connection supporting member for increasing a holding force of the lure when the syringe unit is connected to

the connection target. The connection supporting member 1130 is slidably provided on the lure 1120 or the syringe body so as to be movable between a first position near a tip of the lure 1120 and *whereat the connection supporting member 1130 is secured to the lure*, and a second position away from the tip of the lure 1120 and *whereat the connection supporting member 1130 is secured to the lure 1120*. The lure and connection supporting member are configured and arranged such that, when the connection supporting member is located at the second position, the tip of the lure is exposed (see generally Figs. 1A-1C; and paragraphs [0054]-[0056] of the original specification). As a result of this arrangement, a user is able to visually locate and carefully insert the lure 1120 into the connection target (such as lure lock port 1200) when the connection supporting member 1130 is secured to the lure 1120 at the first position, and the connection supporting member remains secured to the lure when at the first position so as to allow the connection supporting member to reliably and efficiently increase the holding force of the lure.

The Imbert reference discloses a syringe tip cap which includes a luer collar 44 to be inserted onto a tip 22 of a syringe 10. In the outstanding Office Action, the Examiner simply stated that the luer collar 44 corresponds to the connection member and is slidable along the tip 22 while remaining engaged to the tip, and referred to Figure 1. Of course, Figure 1 is an exploded view of the syringe and the cap, and therefore does not illustrate the luer collar 44 being *secured* to the tip 22. Figures 2 and 3 of the Imbert reference, however, appear to disclose the configuration of the luer collar 44 on the tip 22. In particular, Fig. 3 illustrates the luer collar 44 in a second position away from the tip of the lure whereat the luer collar 44 is secured to the lure (i.e., the tip 22). However, Fig. 2 clearly illustrates that the luer collar is *detached* (i.e., not secured) to the lure when the luer collar is moved from the second position toward a first position near the tip of lure. Therefore, it is submitted that the Imbert reference clearly does not teach or suggest a connection supporting member that is slidably provided on the lure or a syringe body so as to be movable between a first position near a tip of the lure and whereat the connection supporting member is secured to the lure and a second position away from the tip of the lure. Accordingly, it is submitted that the Imbert reference does not anticipate or even render obvious amended independent claim 6.

The Examiner's attention is also directed to new dependent claims 20 and 21, which further define the medical syringe recited in amended independent claim 6.

Independent claim 10

Amended independent claim 10 is also directed to a medical syringe that comprises a syringe unit including a syringe body and a lure to be inserted into connection target, and a connection supporting member for increasing a holding force of the lure. As generally illustrated in, for example, Figs. 15A-15D, the lure of syringe 2500 includes a small diameter portion sandwiched between large diameter portions, and the connection supporting member 2330 includes a first member 2331a that has a first opening in a main surface thereof, and a second member 2331b that has a second opening in a main surface thereof. The first member 2331a and the second member 2331b oppose each other such that the main surfaces of the first member and the second member are near or contacting one another. At least one of the first member and second member *is displaceable relative to the other such that a hole formed by the first opening overlapping with the second opening changes between a first size that allows at least one of the large diameter portions to pass therethrough, and a second size that prevents passage of the one of the large diameter portions* (see, for example, paragraph [0086]-[0089] of the original specification). As a result of the arrangement of the medical syringe as recited in amended independent claim 10, the connection supporting member can be securely and easily attached to the syringe unit by simply displacing at least one of the first member and the second member relative to each other so as to change the size of the hole formed by the overlapping first opening and second opening, as illustrated in Figs. 15A-15D, to thereby "trap" the small diameter portion.

In the outstanding Office Action, the Examiner generally asserted that the Imbert reference shows a connection member having two holes "one to be go over the contact part and to stay there and the other to interface with another device, the holes being the first and second member respectively." However, amended independent claim 10 clearly recites that the first member *has a first opening*, while the second member *has a second opening*. Therefore, the

Examiner's statement that the holes *are* the first and second members is not entirely clear, and would not meet the required limitations of claim 10.

Nonetheless, it is submitted that the Imbert reference clearly does not teach or suggest a first member and a second member which oppose each other, at least one of the first member and the second member being displaceable relative to the other so that a hole formed by the first opening of the first member overlapping with the second opening of the second member changes between a first size and a second size, as now clearly recited in amended independent claim 10. Therefore, the Imbert clearly does not anticipate or even render obvious amended independent claim 10. Accordingly, it is respectfully submitted that amended independent claim 10 and the claims that depend therefrom are clearly patentable over the prior art of record.

Independent claim 13

As generally illustrated in, for example, Figures 16-20, amended independent claim 13 is directed to a medical syringe that comprises a syringe body 3010 and a lock connector 3020 for connecting the syringe body 3010 to a connection target. The lock connector 3020 includes a cylindrical connector body, through which the syringe body 3010 is inserted. *A spring body 3031A, 3031B is interposed between an external surface of the syringe body 3011 and an internal surface of the connector body 3200A*, and the syringe body is held with the connector body by *a spring force of the spring body 3031A, 3031B* (see, for example, paragraph [0102] of the original specification). As a result of this arrangement, the syringe body 3010 can be easily inserted into the connector body 3021 and securely held while also being slid back and forth along the longitudinal axis of the syringe body (see paragraph [0103] of the original specification).

In the outstanding Office Action, the Examiner notes that the Imbert reference teaches a rib 323 (contact part) having a larger diameter than the lure 322, but appears to acknowledge that the Imbert reference does not teach a spring or spring body. However, on page 4 of the Office Action, the Examiner simply states that it would have been obvious to one of ordinary skill in the art at the time of the invention to use an elastic body such as a spring or rubber for the contact part. Unfortunately, the Examiner provided no support or reasoning for this assertion of

obviousness, despite the fact that the Imbert reference does not even suggest a spring body as recited in amended independent claim 13. The fact that the Imbert reference teaches that the tip 322 of the syringe may have an angular rib 323 provides absolutely no suggestion of a spring, and there is no reason (other than improper hindsight reasoning) why one of ordinary skill in the art would make the leap from the teachings of the Imbert reference to the medical syringe of claim 13. Therefore, it is submitted that the Imbert reference does not anticipate or even render obvious amended independent claim 13.

Independent claim 16

As generally illustrated in Fig. 23, for example, the medical syringe of amended independent claim 16 comprises a lock connector 3020 having a cylindrical connector body and a *protrusion 3202A on an inner surface of the connector body 3020*, and the protrusion 3202A extends in a radially-inward direction of the connector body 3020. The medical syringe also comprises a syringe body 3010 which has a *return axial groove 3130A extending in a syringe axial direction*, and the return axial groove is located in a external surface of the syringe body. The lock connector is held so as to be movable back and forth along the syringe body 3010, and protrusion 3202A of the connector body is fitted in the return axial groove 3130A so as to be movable within the return axial groove (see paragraph [0118] of the original specification).

At the bottom of page 4 of the Office Action, the Examiner rejected original independent claim 16 by simply stating that it would have been obvious to one of ordinary skill in the art to make spiral grooves of a contact part fit with threads of a connection member. However, the Examiner has not even attempted to explain how the Imbert reference teaches a *protrusion* and a *return groove*. In fact, the Imbert reference does not teach or even suggest a protrusion extending in a *radially-inward direction of a connector body*, or a return axial groove extending a *syringe axial direction*. Therefore, it follows that the Imbert reference also does not teach or suggest that the *protrusion is fitted in the return axial groove of the syringe body so as to be movable within the return axial groove*. Accordingly, it is submitted that the Imbert reference does not anticipate or even render obvious amended independent claim 16.

Independent claim 17

Amended independent claim 17 is directed to a medical syringe somewhat similar to the medical syringe of independent claim 16. However, independent claim 17 recites that the return axial groove extends in a syringe axial direction and is provided *in an internal surface of the connector body*, while the syringe body has a protrusion on an external surface thereof, and the protrusion *extends in a radially-outward direction of the syringe body* (see paragraph [0125] of the original specification).

Similar to independent claim 16 discussed above, the Examiner simply stated that it would have been obvious to make a spiral groove of the contact part fit with threads of a connector member, and further asserted (presumably with respect to claim 17) that it would have been obvious that the grooves and engaging threads may switch locations. However, as noted above with respect to independent claim 16, the Imbert reference does not even suggest an axial groove and *a protrusion fitted in the axial groove so as to be movable within the axial groove*. More particularly, the Imbert reference does not suggest a lock connector having a return axial groove extending in syringe axial direction in an internal surface of the connector body, and a syringe body having a protrusion on an external surface thereof, and extending in a radially-outward direction of syringe body. Accordingly, it is respectfully submitted that the Imbert reference does not anticipate or even render obvious amended independent claim 17.

In view of the above amendments and remarks, it is submitted that the present application is now in condition for allowance. However, if the Examiner should have any comments or suggestions to help speed the prosecution of this application, the Examiner is requested to contact the Applicant's undersigned representative.

Respectfully submitted,

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May 29, 2009